

ELECTRONIC DETERMINATION	17 November 2023
Panel reference	PPSSCC-504 – Blacktown – MOD-23-00462 – 38 Cudgegong Road, Rouse Hill
Chair	Abigail Goldberg

In relation to this matter, I declar	re that I have:	
no known conflict of inter	est ⊠ OR	
an actual $\square$ , potential $\square$	l or reasonably perceived³ □ con	iflict of interest, as detailed below:
Many	Abigail Goldberg	17 November 2023
Signature	Name	Date
Should a conflict be declared the determined by the chair, and cou		iate management measures are in place, as dditional measures.
Chair Signature	Name	Date

Please return this form to the Planning Panels Secretariat at  $\underline{enquiry@planningpanels.nsw.gov.au}$ 

 $<sup>^{1}</sup>$  An 'actual' conflict of interests is where there is a direct conflict between a member's duties and responsibilities and their private interests or other duties.

 $<sup>^{2}</sup>$  A 'potential' conflict of interests is where a panel member has a private interest or other duty that could conflict with their duties as a panel member in the future.

<sup>&</sup>lt;sup>3</sup> A 'reasonably perceived' conflict of interests is where a person could reasonably perceive that a panel member's private interests or other duties are likely to improperly influence the performance of their duties as a panel member, whether or not this is in fact the case.



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			-
			-
	Chris Quilkey	17 November 2023	
Signature	Name	Date	
Should a conflict be declared th determined by the chair, and co		opriate management measures are in place, as additional measures.	
			_
Chair Signature	Name	Date	
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-		
$\bigcap$		
9	David Ryan	17 November 2023
Signature	Name	Date
-	panel chair is to ensure appropriate attersign this form, noting any addition	management measures are in place, as onal measures.
Chair Signature	Name	Date
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Monf	Moninder Singh	17 November 2023
Signature	Name	Date
	panel chair is to ensure appropriate untersign this form, noting any addit	e management measures are in place, as ional measures.
Chair Signature	Name	Date
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			<del></del>
			_
			_
MM	Steve Murray	17 November 2023	
Signature	Name	Date	
	ared the panel chair is to ensure a , and countersign this form, noting	ppropriate management measures are in place, a gany additional measures.	S
Chair Signature	Name	Date	
Please return this form t	o the Planning Panels Secretariat a	at enquiry@planningpanels.nsw.gov.au	

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